Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART ( (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			29				Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 9 minus 20=		. 9			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 =		. ,9			X40=		OR	X80=		
ΜU	LTIPLE DEPENI	DENT CLAIM P	ESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in colu						olumn 2	L	TOTAL		OR	TOTAL		
	CI		MENDED	MENDED - PART II			(Column 3) SMALL EN			OR	OTHER THAN SMALL ENTITY		
	rannosaracipatore englests	(Column 1)	TONO PARAMETERS VIII		mn 2) HEST	(Column 3)	-	SIVIALL			SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	••		=	L	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	*** CNIDCNI	T CL AIAA	=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	OLTIPLE DEP	ENDEN	CLAIN			+135=		OR	+270=		
									<u> </u>	OR	TOTAL ADDIT. FEE		
		20.1		(Onl.	01	(Calumn 2)	А	DDIT. FEE	-	2	ADDIT: 1 CC		
	INTERESTRATE POPULATION	(Column 1)	Providence (State)		ımn 2) HEST	(Column 3)	Г		ADDI	1	<del></del>	ADDI-	
AMENDMENT B	17 100 117	REMAINING AFTER AMENDMENT		NUI PREV	MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	* *		=		X\$ 9=		OR	X\$18=		
	Independent		Minus		IT CLAIM	]=		X40=		OR	X80=		
L	THIRST PRESE	NTATION OF M	OLTIPLE DEP	ENDEN	T CLAIN	<u> </u>	۱ ۲	+135=		OR	+270=		
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)			umn 2)_	(Column 3)			•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	SHEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent		Minus		ALT CLAP	]=	<b>↓</b> ┞	X40=		OR	X80=		
٦	FIRST PRESE	VI CLAIN	/1	<b>'</b>	+135=		OR	+270=					
	If the entry in colu	ımn 1 is less than	the entry in colu	mn 2, wi	rite "0" in c	olumn 3.	L	TOTAL		ł	TOTAL		
٠٠	If the "Highest Nu	imber Previously I	Paid For IN THI	S SPACE	E is less th	an 20, enter *20.	· A	DDIT. FEE		JOR	ADDIT. FEE	<u> </u>	
	The "Highest Nur	mber Previously P	aid For" (Total o	r Indepe	ndent) is th	ne highest number	er tou	nd in the ap	propriate bo	ox in c	olumn 1.		